NH Community Behavioral Health ASSOCIATION

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RE: Comments on the 1115 Draft Premium Assistance Waiver application

The NH Community Behavioral Health Association, representing the state's ten community mental health centers (CMHCs), wishes to submit comments on the 1115 Draft Premium Assistance Waiver application on behalf of our centers and the more than 50,000 adults and children we provide care for annually. The following are our primary concerns:

1. Proposed cost-sharing:

- The presumption is that cost-sharing increases a sense of personal responsibility. While this may be a valid proposition in many health care settings, it is a much more challenging proposition for the population we serve, namely, those with Serious Mental Illness (SMI) and Serious and Persistent Mental Illness (SPMI). Any potential cost benefits need to be balanced with the creation of a new disincentive for those who already have a hard time managing chronic conditions.
- As a general matter, the CMHCs do not collect co-pays now from Medicaid consumers. Adding the technology required for collection of co-pays from a small group of consumers will create not only a new administrative set of costs, but also will have the undesired effect of diverting dollars away from direct care. While the waiver language applies to in-patient care, and most CMHCs have limited in-patient facilities, this remains a concern for the CMHCs that will be burdened with this new requirement, such as the Mental Health Center of Greater Manchester, which operates the Cypress Center.
- 2. The proposed waiver of Medicaid's 24-hour prior authorization requirement for prescription drugs and replacement with a 72-hour standard:
 - We do not understand the rationale for this change.
 - Extending prior authorization requirements for necessary medications from one day to three days creates significant problems for those with a Serious Mental Illness or a

- Serious and Persistent Mental Illness, even with the allowance of a 72-hour supply "in the event of an emergency." How is an emergency defined?
- We need to emphasize that the population we serve, in particular, find it difficult to manage their chronic conditions, to make and keep appointments, to fill and take their prescriptions, and to deal with bureaucracy. Creating another barrier means more people will fall through the cracks, will experience unnecessary setbacks in their treatment, and will find it even more difficult to become contributing members of the community.
- We suggest that prescription drugs for those with a Serious Mental Illness or a Serious and Persistent Mental Illness be exempt from this provision.

We appreciate the hard work that has gone into the waiver application by Department staff. Thank you for the opportunity to comment.

Very truly yours,

Jay Couture, President

NH Community Behavioral Health Association